Fill	in this information to iden	ntify your case	:					
Deb	otor 1 Mark R H	lopkins						
	First Name		Middle Name	L	ast Name			
		L Hopkins						
(Spo	use if, filing) First Name		Middle Name	L	ast Name			
Uni	ed States Bankruptcy Court	t for the: DI	STRICT OF OREGO	ON				
Cas	e number 18-30938							
(if kn	own)						☐ Chec	k if this is an
							amer	ded filing
Su Be a	ficial Form 106S mmary of Your As s complete and accurate a rmation. Fill out all of your original forms, you must	ssets and as possible. If r schedules fir	two married people st; then complete tl	le are filing the informa	together, both aration on this form.	e equally responsible . If you are filing amen	for supplyi	
Par	1: Summarize Your As	ssets						
							Your a	essets of what you own
1.	Schedule A/B: Property ( 1a. Copy line 55, Total rea						\$	203,059.00
	1b. Copy line 62, Total per	rsonal property	, from Schedule A/B.	i			\$	5,080.00
	1c. Copy line 63, Total of a	all property on	Schedule A/B				\$	208,139.00
Par	2: Summarize Your Lia	abilities						
								iabilities nt you owe
2.	Schedule D: Creditors Wh 2a. Copy the total you liste					f Part 1 of Schedule D	. \$	169,000.00
3.	Schedule E/F: Creditors W. 3a. Copy the total claims to					E/F	\$	0.00
	3b. Copy the total claims to	from Part 2 (no	npriority unsecured o	claims) fror	m line 6j of <i>Schedul</i>	le E/F	\$	10,560.44
						Your total liabilitie	s \$	179,560.44
Par	t3: Summarize Your Inc	come and Exp	enses					
4.	Schedule I: Your Income (Copy your combined mont			le I			\$	2,615.92
5.	Schedule J: Your Expense Copy your monthly expense						\$	2,465.00
Par	t 4: Answer These Ques	stions for Adn	inistrative and Stat	tistical Red	cords			
6.	Are you filing for bankru	intev linder Ch	nanters 7 11 or 122	?				
0.					box and submit this	form to the court with y	our other so	hedules.
	Yes							
7.	What kind of debt do you	u have?						
	Your debts are prim household purpose."					an individual primarily fo U.S.C. § 159.	r a personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Debtor 1	Mark R Hopkins
Debtor 2	Kathryn L Hopkins

Case number (if known) 18-30938

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 4,370.03

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Filli	n this inforn	nation to identify	your case and th	is filinç	g:				
Deb	tor 1	Mark R Hopk	kins						
D - I	0	First Name		Name		Last Name			
	tor 2 se, if filing)	Kathryn L Ho	•	Name		Last Name			
Unit	ed States Ba	nkruptcy Court for	the: DISTRICT	OF ORI	EGON				
Cas	e number	18-30938				_			☐ Check if this is a amended filing
		rm 106A/B <b>e A/B: Pr</b>	-						12/15
n ead	h category, s	eparately list and de	escribe items. List a			an asset fits in more than one e are filing together, both are			the category where yo
nforr		e space is needed, a				e top of any additional pages			
Part	1: Describe	Each Residence, Bu	uilding, Land, or Otl	her Real	I Estate You Ov	wn or Have an Interest In			
□	No. Go to Par Yes. Where is	t 2. s the property?							
1.1	633 NE 7tl	h		What		y? Check all that apply			
		if available, or other desc	cription		l '	home Iti-unit building n or cooperative	the amount	of any secured	ims or exemptions. Put d claims on Schedule D: ns Secured by Property.
	McMinnvi	lle OR	97128-0000			d or mobile home	Current val	erty?	Current value of the portion you own?
	City	State	ZIP Code			roperty	\$20	3,059.00	\$203,059.0
					Other	t in the property? Check one	(such as fe a life estate	e simple, tena e), if known.	our ownership interest ancy by the entireties, o
					Debtor 1 only		Fee simp	ole	
	Yamhill								
	County				Debtor 1 and	•			munity property
					, 11 10 dot 0110 0	of the debtors and another rou wish to add about this iter ion number:	,	tructions)	
						from Part 1, including any			\$203,059.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Debtor 1 Debtor 2	Kathryn L Hopkins		Case number (if known)	18-30938
Cars,	vans, trucks, tractors, sport utility v	ehicles, motorcycles		
■ Yes				
Mo Ye Ap Ot	Aske: Ford  Approximate mileage: her information:  Discretion: 633 NE 7th,	Who has an interest in the property? Check one  ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	the amount of any Creditors Who Hav Current value of t entire property?	portion you own?
Me	cMinnville OR 97128	☐ Check if this is community property (see instructions)	\$500	.00 \$500.00
Mo Ye Ap	ake: Kia  Sedona  2003  proximate mileage: her information:	Who has an interest in the property? Check one  ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: re Claims Secured by Property.  he Current value of the portion you own?
	ocation: 633 NE 7th, cMinnville OR 97128	☐ Check if this is community property (see instructions)	\$2,000	.00 \$2,000.00
	he dollar value of the portion you o	vn for all of your entries from Part 2, includin		\$2,500.00
			L	
	Describe Your Personal and Household I Down or have any legal or equitable in	tems  nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Exam ☐ No	chold goods and furnishings ples: Major appliances, furniture, linen s. Describe	s, china, kitchenware		
		nishings and Furniture NE 7th, McMinnville OR 97128		\$1,000.00
□ No		deo, stereo, and digital equipment; computers, pr media players, games	inters, scanners; music co	ollections; electronic devices
	Television and	Call Phones		\$250.00

Official Form 106A/B Schedule A/B: Property page 2

	ebtor 1 Mark R Ho ebtor 2 <u>Kathryn L</u>	•	Case number (if known)	18-30938
8.	Collectibles of value  Examples: Antiques an other collection	es, or other art objects; stamp, coin	, or baseball card collections;	
	Yes. Describe			
		Tea Kettles Location: 633 NE 7th, McMinnville OR 97128		\$150.00
9.	Equipment for sports  Examples: Sports, pho musical ins  No Yes, Describe	otographic, exercise, and other hobby equipment; bicycles, p	pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
10	. Firearms	les, shotguns, ammunition, and related equipment		
11	. Clothes  Examples: Everyday  □ No  ■ Yes. Describe	clothes, furs, leather coats, designer wear, shoes, accessor	ies	
		Mens and Womens Clothing, Coat/Jackets and Location: 633 NE 7th, McMinnville OR 97128	d Shoes	\$600.00
12	Examples: Everyday  □ No  Yes. Describe	jewelry, costume jewelry, engagement rings, wedding rings,	heirloom jewelry, watches, gems, ξ	gold, silver
		Costume Jewelry Location: 633 NE 7th, McMinnville OR 97128		\$50.00
13	Non-farm animals     Examples: Dogs, cat     No     Yes. Describe	s, birds, horses		
14	<ul><li>Any other personal a</li><li>■ No</li><li>□ Yes. Give specific</li></ul>	and household items you did not already list, including a	any health aids you did not list	
15		e of all of your entries from Part 3, including any entries at number here		\$2,050.00
Pa	art 4: Describe Your Fin	ancial Assets		
D	o you own or have an	/ legal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16	□No	u have in your wallet, in your home, in a safe deposit box, a	nd on hand when you file your petiti	on
	<b>—</b> 165			

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1 Debtor 2	Mark R Hopkins Kathryn L Hopkin	s		Case number (if known)	18-30938
				Cash Location: 633 NE 7th, McMinnville OR 97128	\$20.00
			nts; certificates of deposit; shares in cr ith the same institution, list each.	edit unions, brokerage l	nouses, and other similar
□ No			Local Market and a second		
Yes			Institution name:		
			USBank POB 1800		
	17.	1. Checking x7554	St Paul, MN 55101-0800		\$0.00
			USBank		
		- 0 ! 4000	POB 1800		<b>\$40.0</b> 0
	17.:	2. <b>Savings x1696</b>	St Paul, MN 55101-0800		\$10.00 
			Columbia Bank		
	17.:	3. Checking x0286	723 NE Baker McMinnville, OR 97128-494	7	\$500.00
joint v ■ No	enture	·	ated and unincorporated businesse	s, including an interes	t in an LLC, partnership, and
☐ Yes.		on about them Name of entity:		% of ownership:	
Negoti Non-ne ■ No	able instruments includ egotiable instruments a Give specific informatio	e personal checks, cashi re those you cannot trans	able and non-negotiable instrumenters' checks, promissory notes, and mofer to someone by signing or delivering	oney orders.	
<i>Examp</i> □ No	•	RISA, Keogh, 401(k), 403	(b), thrift savings accounts, or other p	ension or profit-sharing	plans
Yes.	List each account sepa Тур	rately. se of account:	Institution name:		
			First Student		
			McMinnville, Oregon 97128	<u> </u>	Unknown
			Mark's 401(k)		\$0.00
Your s		sits you have made so th	nat you may continue service or use frouse blic utilities (electric, gas, water), telection Institution name or individual:		nies, or others

	ebtor 1 ebtor 2	Mark R Ho Kathryn L					Case number (if kn	own) <b>1</b>	8-30938
23.	Annuitie ■ No	es (A contrad	ct for a perio	dic payment of	f money to you, eith	ner for life or for a	number of years)		
	☐ Yes		Issuer nam	ne and descript	tion.				
24.				n an account and 529(b)(1).		E program, or u	nder a qualified state tuitio	n progr	am.
	☐ Yes		Institution	name and desc	cription. Separately	file the records o	f any interests.11 U.S.C. § 52	21(c):	
25.	Trusts, o ■ No	equitable o	r future inte	rests in prope	erty (other than an	ything listed in l	ine 1), and rights or power	s exerc	isable for your benefit
	☐ Yes. 0	Give specific	information	about them					
	Example ■ No	les: Internet of	domain nam		ets, and other inte proceeds from royal				
	Example ■ No	les: Building	permits, exc	er general inta lusive licenses about them		ciation holdings, l	iquor licenses, professional li	icenses	
		roperty owe							Current value of the
	oney or p	roperty ow	cu to you:						portion you own? Do not deduct secured claims or exemptions.
	■ No	inds owed t		about them, in	cluding whether you	u already filed the	e returns and the tax years		
	■ No		·	,, ,	usal support, child	support, mainten	ance, divorce settlement, pro	perty se	ettlement
	Li res. c	sive specific	illioilliation.						
			wages, disab	ility insurance	payments, disabilit someone else	y benefits, sick pa	ay, vacation pay, workers' co	mpensa	ation, Social Security
		Give specific	information						
	Example	<b>s in insuran</b> les: Health, c			health savings acco	ount (HSA); credit	t, homeowner's, or renter's in	surance	•
	■ No	lama tha ina		nany of acab n	alian and list its val				
	⊔ Yes. N	name the ins		pany of each p mpany name:	olicy and list its val	ue.	Beneficiary:		Surrender or refund value:
	If you ar				n someone who ha ct proceeds from a		icy, or are currently entitled to	o receiv	e property because
		Give specific	information						
	Example ■ No		s, employme	ent disputes, in	you have filed a la surance claims, or		a demand for payment		

Debtoi Debtoi	•		Case number (if known)	18-30938
34. <b>O</b> tl	ner contingent and unliquidated claims of every nature, includ No	ding counterclaims	of the debtor and rights to	set off claims
	es. Describe each claim			
35. <b>A</b> n	y financial assets you did not already list			
<b>I</b>				
ЦΥ	es. Give specific information			
	dd the dollar value of all of your entries from Part 4, including pr Part 4. Write that number here	, , , , ,	,	\$530.00
Part 5:	Describe Any Business-Related Property You Own or Have an Intere	st In. List any real esta	ate in Part 1.	
37. <b>Do</b> :	you own or have any legal or equitable interest in any business-related	d property?		
N	o. Go to Part 6.			
☐ Ye	es. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You of If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. <b>Do</b>	you own or have any legal or equitable interest in any farm-	or commercial fishin	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
E	you have other property of any kind you did not already list?  kamples: Season tickets, country club membership			
■ N	No 'es. Give specific information			
	es. Give specific information		r	
54. <b>A</b>	dd the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>P</b>	art 1: Total real estate, line 2			\$203,059.00
56. <b>P</b>	art 2: Total vehicles, line 5	\$2,500.00		
57. <b>P</b>	art 3: Total personal and household items, line 15	\$2,050.00		
	art 4: Total financial assets, line 36	\$530.00		
	art 5: Total business-related property, line 45	\$0.00		
	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>P</b>	art 7: Total other property not listed, line 54	\$0.00		
62. <b>T</b>	otal personal property. Add lines 56 through 61	\$5,080.00	Copy personal property to	stal <b>\$5,080.00</b>
63. <b>T</b>	otal of all property on Schedule A/B. Add line 55 + line 62			\$208,139.00
			L	

Official Form 106A/B Schedule A/B: Property page 6

Fill in this info	rmation to identify your	case:		
Debtor 1	Mark R Hopkins	Million I		
	First Name	Middle Name	Last Name	
Debtor 2	Kathryn L Hopkir	ıs		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Bankruptcy Court for the:	DISTRICT OF OREGON		
Case number	18-30938			
(if known)				☐ Check if this is an amended filing
				_

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

٠.	Which set of exemptions are you claiming: Office only, even if your spouse is ming with you.										
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)										
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.										
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption						
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.							
	633 NE 7th McMinnville, OR 97128 Yamhill County	\$203,059.00		\$47,350.00	11 U.S.C. § 522(d)(1)						
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit							
	1978 Ford F250 300,000 miles Location: 633 NE 7th, McMinnville	\$500.00		\$500.00	11 U.S.C. § 522(d)(2)						
	OR 97128 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit							
	2003 Kia Sedona 150,000 miles Location: 633 NE 7th, McMinnville	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(2)						
	OR 97128 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit							
	Household Furnishings and Furniture	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)						
	Location: 633 NE 7th, McMinnville OR 97128			100% of fair market value, up to any applicable statutory limit							
	Line from Schedule A/B: <b>6.1</b>										
	<b>Television and Cell Phones</b> Line from <i>Schedule A/B</i> : <b>7.1</b>	\$250.00		\$250.00	11 U.S.C. § 522(d)(3)						
				100% of fair market value, up to any applicable statutory limit							

	bbtor 1 Mark R Hopkins  Kathryn L Hopkins			Case number (if known)	18-30938
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Tea Kettles Location: 633 NE 7th, McMinnville	\$150.00		\$150.00	11 U.S.C. § 522(d)(3)
	OR 97128 Line from Schedule A/B: 8.1			100% of fair market value, up to any applicable statutory limit	
	Mens and Womens Clothing, Coat/Jackets and Shoes	\$600.00		\$600.00	11 U.S.C. § 522(d)(3)
	Location: 633 NE 7th, McMinnville OR 97128			100% of fair market value, up to any applicable statutory limit	
	Line from Schedule A/B: 11.1				
	Costume Jewelry Location: 633 NE 7th, McMinnville	\$50.00		\$50.00	11 U.S.C. § 522(d)(4)
	OR 97128 Line from <i>Schedule A/B</i> : 12.1			100% of fair market value, up to any applicable statutory limit	
	Cash Location: 633 NE 7th, McMinnville	\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
	OR 97128 Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit	
	Checking x7554: USBank POB 1800	\$0.00		\$0.00	11 U.S.C. § 522(d)(5)
	St Paul, MN 55101-0800 Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Savings x1696: USBank	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)
	POB 1800 St Paul, MN 55101-0800 Line from <i>Schedule A/B</i> : 17.2			100% of fair market value, up to any applicable statutory limit	
	Checking x0286: Columbia Bank 723 NE Baker	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)
	McMinnville, OR 97128-4947 Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No  ☐ Yes. Did you acquire the property cover	3 years after that for ca	ises fi	ŕ	,
	□ No □ Yes				

Fill in this informa	tion to identify you	ır case:				
Debtor 1	Mark R Hopkins					
Dobtor 2	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	Kathryn L Hopk	INS Middle Name	Last Name			
United States Bank	ruptcy Court for the:	DISTRICT OF OREGON				
Case number 18	3-30938					
(if known)						if this is an ded filing
Official Form	106D					
Schedule D	): Creditors	Who Have Claims	s Secured	by Propert	у	12/15
		If two married people are filing tog out, number the entries, and attacl				
1. Do any creditors ha	ave claims secured by	your property?				
☐ No. Check the	his box and submit t	his form to the court with your ot	her schedules. Yo	ou have nothing else t	o report on this form.	
Yes. Fill in a	III of the information	below.				
Part 1: List All S	Secured Claims					
		more than one secured claim, list the	creditor separately	Column A	Column B	Column C
for each claim. If more	e than one creditor has	a particular claim, list the other cred cal order according to the creditor's r	litors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Caliber Hon	ne Loans	Describe the property that secur	es the claim:	\$169,000.00	\$203,059.00	\$0.00
Creditor's Name		633 NE 7th McMinnville, C Yamhill County	OR 97128			
c/o Joe And 3701 Regen Irving, TX 7		As of the date you file, the claim apply.  Contingent	is: Check all that			
	ity, State & Zip Code	☐ Unliquidated				
Who owes the debt	t? Check one.	☐ Disputed  Nature of lien. Check all that app	ıly.			
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such car loan)	as mortgage or sec	eured		
■ Debtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien,	mechanic's lien)			
At least one of the		U Judgment lien from a lawsuit				
☐ Check if this clair community debt		☐ Other (including a right to offset	t)			
Date debt was incurr	red	Last 4 digits of account n	umber <u>8825</u>			
		olumn A on this page. Write that n the dollar value totals from all pag		\$169,00		
Write that number		mo donar variao roman mom am pag	,,,,,	\$169,00	0.00	
Part 2: List Othe	rs to Be Notified fo	r a Debt That You Already List	ted			
trying to collect from than one creditor for	you for a debt you o	e notified about your bankruptcy f we to someone else, list the credit you listed in Part 1, list the additi is page.	tor in Part 1, and th	nen list the collection ag	gency here. Similarly, if	you have more
		. •				
Name, Number Caliber Ho	r, Street, City, State & 2 me Loans	Zip Code	On which	ch line in Part 1 did you e	nter the creditor? 2.1	
POB 61906 Dallas, TX	63 75261-9063		Last 4 d	ligits of account number_	_	

Debtor 1	Mark R Hopkins			Case number (if know)	18-30938
	First Name	Middle Name	Last Name		
Debtor 2	Kathryn L Hopkir	ns			
	First Name	Middle Name	Last Name		
CI 11	me, Number, Street, City, ear Recon Corp 1 SW Columbia St ortland, OR 97201	·		On which line in Part 1 did you ente	er the creditor?

Fill in this in	formation to identify your ca	ise:					
Debtor 1							
Deptor I	Mark R Hopkins First Name	Middle Name	Last I	Name			
Debtor 2	Kathryn L Hopkins						
(Spouse if, filing)	First Name	Middle Name	Last I	Name			
United States	Bankruptcy Court for the:	DISTRICT OF OF	EGON				
Case number	18-30938					☐ Check	if this is an
						_	ed filing
Official Fo	orm 106E/F						
	E/F: Creditors Wh	o Have Un	secured Clai	ims			12/15
any executory of Schedule G: Ex Schedule D: Cr left. Attach the name and case	e and accurate as possible. Use contracts or unexpired leases th eccutory Contracts and Unexpire editors Who Have Claims Secur Continuation Page to this page. In unber (if known).	nat could result in a ed Leases (Official ed by Property. If n If you have no info	claim. Also list exec Form 106G). Do not i nore space is needed	cutory contracts o nclude any credito I, copy the Part yo	n Schedule A/B: F ors with partially s u need, fill it out, I	roperty (Official For ecured claims that a number the entries ir	m 106A/B) and on re listed in the boxes on the
	editors have priority unsecured		?				
☐ No. Go	to Part 2.	· -					
Yes.							
2. List all of identify who possible, list	your priority unsecured claims. at type of claim it is. If a claim has st the claims in alphabetical order lore than one creditor holds a parti	both priority and nor according to the crea	priority amounts, list the liter's name. If you have	hat claim here and s ve more than two pr	show both priority a	nd nonpriority amount	s. As much as
(For an exp	planation of each type of claim, see	e the instructions for	this form in the instruc		otal claim	Priority amount	Nonpriority amount
2.1 Inter	nal Revenue Service	Last 4 d	igits of account num	ber	Unknown	Unknown	Unknown
Priorit	y Creditor's Name		as the debt incurred				
	adelphia, PA 19101-7346	Wilch	as the dest meaned	•		-	
Numb	er Street City State Zlp Code	As of th	e date you file, the cl	aim is: Check all th	at apply		
Who incu	urred the debt? Check one.	☐ Cont	ngent				
☐ Debto	r 1 only	☐ Unliq	uidated				
☐ Debto	or 2 only	☐ Disp	ıted				
■ Debto	or 1 and Debtor 2 only	•	PRIORITY unsecured	d claim:			
□ At lea	st one of the debtors and another	☐ Dom	estic support obligation	ns			
_	k if this claim is for a communit	_	s and certain other del		/ornmont		
	im subject to offset?		s and certain other del	, ,			
■ No	iiii subject to onset?		r. Specify	ar injury write you w	ere intoxicated		
☐ Yes		☐ Otne		Income Tax -	Precautionary	,	
					<u>-</u>		
	gon Department of Reven y Creditor's Name	Last 4 d	igits of account num	ber	Unknown	Unknown	Unknown
	Center St., NE	When w	as the debt incurred	?			
	m, OR 97301					-	
	er Street City State Zlp Code urred the debt? Check one.	_	e date you file, the cl	aim is: Check all th	at apply		
_		☐ Cont	•				
☐ Debto	•	☐ Unliq	uidated				
☐ Debto	r 2 only	☐ Disp	ited				
Debto	or 1 and Debtor 2 only	Type of	PRIORITY unsecured	d claim:			
☐ At lea	st one of the debtors and another	□ Dom	estic support obligation	ns			
☐ Chec	k if this claim is for a communit	y debt Taxe	s and certain other del	bts you owe the gov	vernment		
	nim subject to offset?		ns for death or persona				
■ No		☐ Othe	r. Specify				
☐ Yes				state income	tax		

Debte		Mark R Hopkins Kathryn L Hopkins		Case number (if know)	18-30938
Part :	2:	List All of Your NONPRIORITY Unsecur	red Claims		
3. D	o an	/ creditors have nonpriority unsecured claims	s against you?		
_	_ `	You have nothing to report in this part. Submit the	-	adulas	
			ins form to the court with your other schi	edules.	
	Yes	3.			
u th	nsecu	I of your nonpriority unsecured claims in the aured claim, list the creditor separately for each claime creditor holds a particular claim, list the other of	aim. For each claim listed, identify what	type of claim it is. Do not list	claims already included in Part 1. If more
					Total claim
	Α	merican Medical Collection			
4.1		gency	Last 4 digits of account number	356x	\$1,028.25
	4	onpriority Creditor's Name Westchester Plaza, Ste 110 Imsford, NY 10523	When was the debt incurred?	2017	
		umber Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	W	ho incurred the debt? Check one.			
		Debtor 1 only	☐ Contingent		
		Debtor 2 only	☐ Unliquidated		
		Debtor 1 and Debtor 2 only	☐ Disputed		
		At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
		Check if this claim is for a community	☐ Student loans		
		ebt the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not
		No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts
		l Yes	Other. Specify Laboratory	Corporation of Ame	rica
4.2	Α	sset Systems, Inc.	Last 4 digits of account number	2375	\$189.17
		onpriority Creditor's Name		2017	
		OB 14550 ortland, Oregon  97293-0550	When was the debt incurred?	2017	
		umber Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	W	ho incurred the debt? Check one.			
		Debtor 1 only	☐ Contingent		
		Debtor 2 only	☐ Unliquidated		
		Debtor 1 and Debtor 2 only	☐ Disputed		
		At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
		Check if this claim is for a community	☐ Student loans		
		ebt	Obligations arising out of a sepa	aration agreement or divorce	that you did not
	_	the claim subject to offset?	report as priority claims		
		No	Debts to pension or profit-sharing		
		l <sub>Yes</sub>	■ Other. Specify Services	rvices: Legacy Labor	ratory

	or 1 Mark R Hopkins or 2 Kathryn L Hopkins	Case number (if know) 18-	30938
1.3	Credence	Last 4 digits of account number 6932	\$232.86
	Nonpriority Creditor's Name 17000 Dallas Parkway Ste 204	When was the debt incurred? 2017	
	Dallas, TX 75248		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that yo report as priority claims	u did not
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Cable Services: Directtv LLC	
4.4	Credit Corp Solutions Inc	Last 4 digits of account number	\$1,106.16
	Nonpriority Creditor's Name 180 Election Rd, Ste 200 Draper, UT 84020	When was the debt incurred? 2017	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	$\square$ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that yo	u did not
	<u> </u>	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	No		
	Yes	Other. Specify Credit Card: Mid America/Genesis Co	'edit
4.5	Emergency Med Assoc of McMinnville	Last 4 digits of account number 0040	\$315.00
	Nonpriority Creditor's Name POB 3005	When was the debt incurred? 2017	
	Portland, OR 97208-3005  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no of the date you me, the diam to. Oneon an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that yo report as priority claims	u did not
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Services	

	· 1 Mark R Hopkins · 2 Kathryn L Hopkins		Case number (if know) 18-30938	
4.6	Legacy Health	Last 4 digits of account number	6303	\$265.92
4.0	Nonpriority Creditor's Name	Last 4 digits of account number	0303	<b>\$203.92</b>
	POB 2787	When was the debt incurred?	2017	_
	Portland, OR 97208-2787		01 1 1111 1	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
	Debtor 1 only	Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separate port as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Medical Ser	vices	_
4.7	Legacy Health	Last 4 digits of account number	6303	\$205.00
	Nonpriority Creditor's Name	_		<del></del>
	POB 2787	When was the debt incurred?	2017	_
	Portland, OR 97208-2787  Number Street City State Zlp Code		01 1 1111 1	
	Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
	Debtor 1 only			
	_	☐ Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
		report as priority claims		
	■ No	☐ Debts to pension or profit-sharing		
	Yes	Other. Specify Medical Ser	vices	_
4.8	Medical Revenue Service	Last 4 digits of account number	9328	\$701.75
	Nonpriority Creditor's Name POB 938	When was the debt incurred?	2017	
	Vero Beach, FL 32961-0938	When was the dest mounted.	2017	=
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a separ	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	3	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐Yes	Medical Ser  Other. Specify Center	vices: Willamette Valley Medical	

tor 1 Mark R Hopkins tor 2 Kathryn L Hopkins		Case number (if know) 18-30938	
MRS BPO, LLC	Last 4 digits of account number	x121	\$331.03
Nonpriority Creditor's Name 1930 Olney Avenue Cherry Hill, NJ 08003	When was the debt incurred?	2017	• • • • • • • • • • • • • • • • • • • •
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	-		
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes		rvices: Northwest	
Phillips & Cohen	Last 4 digits of account number	0746	\$2,448.07
Nonpriority Creditor's Name Mail Stop: 148 1002 Justison St	When was the debt incurred?	1/18/2018	
Wilmington, DE 19801  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	I: Merrick Bank Corporation	
Trident Asset Management, LLC	Last 4 digits of account number		\$247.00
Nonpriority Creditor's Name 5755 N Point Pkwy Alpharette CA 20022	When was the debt incurred?	11/30/2011	
Alpharetta, GA 30022  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	• ,	,	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Auto Exper	nses: Riebes Auto Parts 474	

	or 2 Kathryn L Hopkins		Case number (if know)	18-30938	
4.1 2	Willamette Valley Medical Center	Last 4 digits of account number	4525		\$1,208.23
	Nonpriority Creditor's Name POB 40757	When was the debt incurred?	7/2017		
	Cincinnati, OH 45274-0757  Number Street City State Zlp Code	As of the date you file, the claim	in Charle all that apply		
	Who incurred the debt? Check one.	As of the date you me, the claim	13. Oneck all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sep	aration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-shari		ebts	
	Yes	Other. Specify Medical Se	ervices		
l.1 }	Willamette Valley Medical Center	Last 4 digits of account number	4525		\$2,282.00
·	Nonpriority Creditor's Name		<del></del>		
	POB 740757	When was the debt incurred?	7/2017		
	Cincinnati, OH 45274-0757  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	710 or the date you me, the olding	10. Onook an triat apply		
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce	e that you did not	
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar de	ebts	
	Yes	Other. Specify Medical Se	ervices		
is tr hav noti	this page only if you have others to be notified rying to collect from you for a debt you owe to e more than one creditor for any of the debts the fifed for any debts in Parts 1 or 2, do not fill out	I about your bankruptcy, for a debt that someone else, list the original creditor in hat you listed in Parts 1 or 2, list the add or submit this page.	n Parts 1 or 2, then list the litional creditors here. If yo	collection agency here.	Similarly, if you
	and Address  dence Resource Management	On which entry in Part 1 or Part 2 did you Line <b>4.3</b> of ( <i>Check one</i> ):	u list the original creditor? $\operatorname{\square}$ Part 1: Creditors with Prior	situ I languare di Cl. 1	
	3 1253	<u> </u>	Part 1: Creditors with Prior  Part 2: Creditors with Non		
out	thgate, MI 48195-0253		Part 2: Creditors with Non	priority Unsecured Claims	i
		Last 4 digits of account number			
	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?		
	lit Corp Solutions, Inc. ast 11400 South 408		Part 1: Creditors with Prior	•	
-	dy, UT 84070		Part 2: Creditors with Non	priority Unsecured Claims	;
Juin	ay, 01 04070	Last 4 digits of account number			
Jame	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?		
Dire	ctTV		Part 1: Creditors with Prior	rity Unsecured Claims	
_	3 105503		Part 2: Creditors with Non	priority Unsecured Claims	;
Atia	nta, GA 30348-5503	Last 4 digits of account number			
			Databa and discussion 1 19 O		
	eand Address acy Laboratory Services	On which entry in Part 1 or Part 2 did you Line <b>4.2</b> of ( <i>Check one</i> ):	u list the original creditor? Part 1: Creditors with Prior	rity Unsecured Claims	
_	NE 2nd Ave		Part 2: Creditors with Non	•	•
			— . a., 2. OIGUILOIS WILII 19011	priority orisecured Giallis	,

Debtor 1	Mark R Hopkins
Debtor 2	Kathryn L Hopkins

Case number (if know)

18-30938

Last 4 digits of account number			
	2 did you list the existed evolutor?		
Line <b>4.9</b> of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
	■ Part 2: Creditors with Nonpriority Unsecured Claims		
Last 4 digits of account number			
On which entry in Part 1 or Part 2 did you list the original creditor?			
Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
	■ Part 2: Creditors with Nonpriority Unsecured Claims		
Last 4 digits of account number			
On which entry in Part 1 or Part 2	2 did you list the original creditor?		
Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
	■ Part 2: Creditors with Nonpriority Unsecured Claims		
Last 4 digits of account number			
	Last 4 digits of account number  On which entry in Part 1 or Part Line 4.11 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part Line 4.12 of (Check one):		

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	6f.	Student loans	6f.	\$ Total Claim 0.00
Total claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$  0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 10,560.44
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 10,560.44

Fill in this infor	mation to identify your	case:				
Debtor 1	Mark R Hopkins					
	First Name	Middle Name	Last Name			
Debtor 2	Debtor 2 Kathryn L Hopkins					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON				
Case number	18-30938					
(if known)				☐ Check if this is an amended filing		

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	Person or	company with	whom you have th	e contract or lease	State what the contract or lease is for
2.1			,,,,		
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5					
•	Name				
	Number	Street			_
	City		State	ZIP Code	_

Fill in this	information to identify your case:				
Debtor 1	Mark R Hopkins				
Dobtor 2		Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) Kathryn L Hopkins First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the: DIST	RICT OF OREGON			
Case num (if known)	ber 18-30938				☐ Check if this is an amended filing
Officia	l Form 106H				
	lule H: Your Codebto	ors			12/15
1. Do  No Yes  2. With Arizor  No Yes  3. In Coin line Form		n a community property a, New Mexico, Puerto Ri egal equivalent live with y	state or territory? co, Texas, Washingt ou at the time? se as a codebtor if y cosigner. Make sur	(Community property states on, and Wisconsin.)  your spouse is filing with the community property of the community property or spouse is filing with the community of the community property or spouse is filing with the community property or spouse is filing with the community property or spouse is filing with the community property states and the community property states are supported by the community property states and the community property states are supported by the community states are sup	ith you. List the person shown reditor on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code			Column 2: The creditor	or to whom you owe the debt
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	
	Number Street City State		ZIP Code		
_	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	
	Number Street		ZID Codo		

Fill in this information	to identify your case:	
Debtor 1	Mark R Hopkins	
Debtor 2 (Spouse, if filing)	Kathryn L Hopkins	
United States Bankrup	otcy Court for the: DISTRICT OF OREGON	
Case number (If known)	-30938	Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Form	1061	13 income as of the following date:  MM / DD/ YYYY

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. If you have more than one job, Employed Employed **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Direct Care Provider School Bus Driver** Include part-time, seasonal, or **Oregon Menonite Residential** self-employed work. **Employer's name** First Student Management LLC **Services** Occupation may include student or homemaker, if it applies. **Employer's address** 325 SW Elmwood 600 Vine St, Ste 1200 McMinnville, OR 97128 Cincinnati, OH 45202 How long employed there? 6 years 24 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

2. \$ 2,212.60 \$ 1,956.80

Case number (if known)

18-30938

				For	Debtor 1	For Debtor 2 or non-filing spouse		
	Copy	y line 4 here	4.	\$	2,212.60	\$_	1,956.80	
5.	List	all payroll deductions:						
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$_ \$	396.44	\$_ \$	249.95 0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	234.78	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	0.00	
	5e.	Insurance	5e.	\$_	62.31	\$	610.00	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00	
	5g.	Union dues	5g.	<u> </u>	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	· : —		+ \$ _	0.00	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	458.75	\$	1,094.73	
7.		sulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,753.85	\$	862.07	
8.	List a	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$_	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	• \$	0.00	+ \$ _	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_	0.00	
4.0			40		[			·
10.		•	10.   \$		1,753.85 + \$		862.07 = \$	2,615.92
	Add 1	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Inclu- other	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your r friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depen				Schedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						2,615.92
13.	Do y	ou expect an increase or decrease within the year after you file this form	?				Combin monthly	ed income
		No.						
		Yes. Explain:						

Fill	in this informa	ation to identify y	our case:					
Deb	otor 1	Mark R Hop	kins			Chec	k if this is:	
	otor 2 ouse, if filing)	Kathryn L H	opkins			☐ An amended filing ☐ A supplement showing postpetition chapter 13 expenses as of the following date:		
Unit	ted States Bank	ruptcy Court for the	e: DISTRI	CT OF OREGON		-	MM / DD / YYYY	
1	se number 18	8-30938						
0	fficial Fo	orm 106J				I		
S	chedule	J: Your	Exper	nses				12/15
info	ormation. If m		eded, atta	. If two married people ar ich another sheet to this i n.				
Par 1.	t 1: Desc	ribe Your House	ehold					
١.	□ No. Go to							
			in a separ	ate household?				
		lo		al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debi	or 2.	
2.	Do vou hav	e dependents?	■ No					
	Do not list D Debtor 2.	•	□ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents							□ No □ Yes
								□ No
								Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.	expenses of	penses include of people other t d your depende	than 👝	No Yes				_ ,
exp	imate your e	a date after the	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	value of suc ficial Form 10		nd have inc	cluded it on Schedule I: Y	our Income		Your expe	enses
4.		or home owners nd any rent for th		nses for your residence. In or lot.	nclude first mortgag	e 4. \$		0.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner'	s, or renter	's insurance		4b. \$		0.00
	4c. Home	e maintenance, re	epair, and ι	upkeep expenses		4c. \$		75.00
_		eowner's associa				4d. \$		0.00
5.	Additional	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

ebtor 1 ebtor 2		Hopkins L Hopkins	Case number (if	(nown)	18-30938
,D(O) Z	Naumyn	поркінь	Case Humber (III)	(IIOWII)	
Util	ities:				
6a.	Electricity	r, heat, natural gas	6a. \$		0.00
6b.	Water, se	wer, garbage collection	6b. \$		346.00
6c.	Telephon	e, cell phone, Internet, satellite, and cable services	6c. \$		150.00
6d.	Other. Sp	ecify:	6d. \$		0.00
Foo	d and hous	sekeeping supplies	7. \$		677.00
Chi	Idcare and	children's education costs	8. \$		0.00
Clo	thing, laund	dry, and dry cleaning	9. \$		138.00
	•	products and services	10. \$		63.00
Med	dical and de	ental expenses	11. \$		326.00
Tra	nsportation	Include gas, maintenance, bus or train fare.	· <u> </u>		
	•	car payments.	12. \$		440.00
Ent	ertainment,	clubs, recreation, newspapers, magazines, and books	13. \$		50.00
Cha	aritable con	tributions and religious donations	14. \$		25.00
Ins	urance.		_		
Do	not include i	nsurance deducted from your pay or included in lines 4 or 20.			
15a	. Life insur	ance	15a. \$		0.00
15b	. Health ins	surance	15b. \$		0.00
15c	. Vehicle ir	nsurance	15c. \$		175.00
15d	. Other ins	urance. Specify:	15d. \$		0.00
Tax	es. Do not i	nclude taxes deducted from your pay or included in lines 4 or 20.			
Spe	cify:	, , ,	16. \$		0.00
Inst	allment or	lease payments:			
17a	. Car paym	nents for Vehicle 1	17a. \$		0.00
17b	. Car paym	nents for Vehicle 2	17b. \$		0.00
17c	. Other. Sp	ecify:	17c. \$		0.00
	. Other. Sp		17d. \$		0.00
	•	s of alimony, maintenance, and support that you did not report as			
		your pay on line 5, Schedule I, Your Income (Official Form 106I).			0.00
Oth	er payment	s you make to support others who do not live with you.	\$		0.00
Spe	cify:		19.		
Oth	er real prop	perty expenses not included in lines 4 or 5 of this form or on Sch	edule I: Your Inc	come.	
20a	<ul> <li>Mortgage</li> </ul>	s on other property	20a. \$ _		0.00
20b	<ul> <li>Real esta</li> </ul>	te taxes	20b. \$		0.00
20c	. Property,	homeowner's, or renter's insurance	20c. \$		0.00
20d	. Maintena	nce, repair, and upkeep expenses	20d. \$		0.00
20e	. Homeowr	ner's association or condominium dues	20e. \$		0.00
Oth	er: Specify:		21. +\$		0.00
	-	monthly expenses			
		through 21.	\$ -		2,465.00
22b	. Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$		
22c	. Add line 22	2a and 22b. The result is your monthly expenses.	\$		2,465.00
C-'	late	monthly not income			
		monthly net income.	22- A		0.045.00
		12 (your combined monthly income) from Schedule I.	23a. \$ _		2,615.92
23D	. Copy you	r monthly expenses from line 22c above.	23b\$ _		2,465.00
00.5	Cubina	your monthly expenses from your monthly in			
23C		your monthly expenses from your monthly income. t is your <i>monthly net income</i> .	23c. \$		150.92
	THE TESUI	t is your monuny her income.	200. [ +		
Do	you expect	an increase or decrease in your expenses within the year after y	ou file this form	?	
For	example, do y	ou expect to finish paying for your car loan within the year or do you expect you			ease or decrease because of a
mod	ification to the	e terms of your mortgage?			
	No.				
_	res.	Explain here:			

Fill in this inform	nation to identify your	case:			
Debtor 1	Mark R Hopkins				
Debtor 1	First Name	Middle Name	Las	t Name	
Debtor 2	Kathryn L Hopki	าร			
(Spouse if, filing)	First Name	Middle Name	Las	t Name	
United States Bar	kruptcy Court for the:	DISTRICT OF OREGON	N		
Case number	8-30938				☐ Check if this is an amended filing
Official Form					
Declarati	ion About a	an Individual	Debte	or's Schedules	12/15
years, or both. 18	Below		ruptcy cas	e can result in fines up to \$250,00	50, or imprisonment for up to 20
Did you pay	or agree to pay some	eone who is NOT an attor	ney to help	you fill out bankruptcy forms?	
■ No					
☐ Yes. N	ame of person				kruptcy Petition Preparer's Notice, a, and Signature (Official Form 119)
•	y of perjury, I declare true and correct.	that I have read the sum	mary and s	chedules filed with this declaration	on and
X /s/ Mark	R Hopkins		х	/s/ Kathryn L Hopkins	
Mark R	Hopkins e of Debtor 1			Kathryn L Hopkins Signature of Debtor 2	

Date **April 9, 2018** 

Date **April 9, 2018** 

Fill in	this inforn	nation to identify you	r case:			
Debto	r 1	Mark R Hopkins				
		First Name	Middle Name	Last Name		
Debto	r 2 e if, filing)	Kathryn L Hopki	Niddle Name	Last Name		
` '				Edst Name		
United	d States Ba	nkruptcy Court for the:	DISTRICT OF OREGON			
Case (if known		18-30938				Check if this is an mended filing
Stat	ement		Affairs for Individ		ankruptcy	4/16
inform	ation. If m		attach a separate sheet to		y additional pages, write you	
Part 1	Give D	Details About Your Ma	rital Status and Where You	Lived Before		
1. W	hat is you	r current marital statu	ıs?			
	Married Not mar	ried				
2. D	uring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	ı.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
	No Yes. Ma	ike sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	ificial Form 106H).		
Part 2	Explai	n the Sources of You	r Income			
Fi	Il in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
		in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$4,040.00	■ Wages, commissions, bonuses, tips	\$5,387.93
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debtor 1 Mark R Hopkins Debtor 2 Kathryn L Hopkins	s	Case	e number (if known)	8
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 20	■ Wages, commissions, bonuses, tips	\$26,757.19	■ Wages, commissions, bonuses, tips	\$18,930.27
	☐ Operating a business		☐ Operating a business	
For the calendar year before th (January 1 to December 31, 20)		\$25,434.89	■ Wages, commissions, bonuses, tips	\$15,301.02
	☐ Operating a business		☐ Operating a business	
☐ No ☐ Yes. Fill in the details.	Debtor 1	Grago income from	Debtor 2	Green income
	oint case and you have income that sincome from each source separa	-	•	
Yes. Fill in the details.				
	Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of income	Gross income
	Describe below.	each source (before deductions and exclusions)	Describe below.	(before deductions and exclusions)
For last calendar year: (January 1 to December 31, 20	17)	\$0.00	Unemployment	\$2,389.00
For the calendar year before the (January 1 to December 31, 20)		\$0.00	Unemployment	\$2,883.00
Part 3: List Certain Payment	s You Made Before You Filed for	Bankruptcy		
□ No. Neither Debtor 1	btor 2's debts primarily consume nor Debtor 2 has primarily const ly for a personal, family, or househo	umer debts. Consumer debt	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
During the 90 day	ys before you filed for bankruptcy, d	id you pay any creditor a tota	I of \$6,425* or more?	
<b>–</b> ~ .	o line 7.		. ,	
paid not ir	pelow each creditor to whom you pa that creditor. Do not include paymen include payments an attorney for t	nts for domestic support oblig	ations, such as child support	and alimony. Also, do
	stment on 4/01/19 and every 3 year		or after the date of adjustmen	it.
Yes. Debtor 1 or Deb	tor 2 or both have primarily consu	umer debts.		

Creditor's Name and Address

Dates of payment

Total amount you paid

Still owe

Was this payment for ...

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No.

☐ Yes

Go to line 7.

attorney for this bankruptcy case.

Deb	tor 2	Kathryn L Hopkins			Cas	se number (if kno	wn) 18-30938	
	<i>Inside</i> of wh	in 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	artners contr	s; relatives of any ger ol, or owner of 20% o	neral partners; partners partners or more of their voting	erships of which g securities; and	you are a gene d any managing	ral partner; corporations agent, including one for
	_	No Yes. List all payments to an insider.						
	Insid	der's Name and Address	Dat	tes of payment	Total amount paid	Amount you still ow		r this payment
	insid	in 1 year before you filed for bankrupteer? de payments on debts guaranteed or cos	-		ments or transfer a	any property o	n account of a	debt that benefited an
	_	No Yes. List all payments to an insider						
	Insid	der's Name and Address	Dat	tes of payment	Total amount paid	Amount you still ow		or this payment editor's name
Part	4:	Identify Legal Actions, Repossession	ns, an	d Foreclosures				
	List a	in 1 year before you filed for bankrupto Il such matters, including personal injury fications, and contract disputes.						
	_ `	No Yes. Fill in the details.						
		e title e number	Nat	ture of the case	Court or agency		Status of t	the case
		in 1 year before you filed for bankrupt k all that apply and fill in the details below		as any of your prope	erty repossessed, f	oreclosed, gar	nished, attache	ed, seized, or levied?
	_	No. Go to line 11. Yes. Fill in the information below.						
	Cred	ditor Name and Address		scribe the Property	4	Da	ite	Value of the property
	acco	in 90 days before you filed for bankrup unts or refuse to make a payment bec No Yes. Fill in the details.	otcy,	did any creditor, inc		nancial institut	ion, set off any	amounts from your
	Cred	ditor Name and Address	Des	scribe the action the	e creditor took		te action was ken	Amount
		in 1 year before you filed for bankrupt appointed receiver, a custodian, or a			erty in the possess	ion of an assig	nee for the ber	nefit of creditors, a
		No Yes						
Part	5:	List Certain Gifts and Contributions						
	<b>=</b> 1	in 2 years before you filed for bankrup	otcy, c	lid you give any gift	s with a total value	of more than \$	6600 per persor	1?
	Gifts	Yes. Fill in the details for each gift. s with a total value of more than \$600 person		Describe the gifts			ites you gave e gifts	Value
	Pers	son to Whom You Gave the Gift and ress:						

Debtor 1 Mark R Hopkins

Debtor 1 Debtor 2	•		Case number (if known)	18-30938	
_	No	ptcy, did you give any gifts or contribution	s with a total value o	of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or co	ntribution.			
mo Cha	ts or contributions to charities that to re than \$600 arity's Name dress (Number, Street, City, State and ZIP Code)	tal Describe what you contributed	Dates	you ibuted	Value
Part 6:	List Certain Losses				
	nin 1 year before you filed for bankrup ambling?	tcy or since you filed for bankruptcy, did y	ou lose anything be	cause of thef	t, fire, other disaster,
■	No Yes. Fill in the details.				
Dos		Describe any insurance coverage for the lo	nes Date	of your	Value of property
	w the loss occurred	nclude the amount that insurance has paid. Les insurance claims on line 33 of Schedule A/B:	ist pending loss	or your	lost
Part 7:	List Certain Payments or Transfers				
cons Inclu	sulted about seeking bankruptcy or pride any attorneys, bankruptcy petition provide any attorneys, bankruptcy petition provide any attorneys, bankruptcy petition provide any attorneys. No  Yes. Fill in the details.	tcy, did you or anyone else acting on your reparing a bankruptcy petition? eparers, or credit counseling agencies for ser  Description and value of any proper transferred	vices required in your	bankruptcy.	Amount of
Em	dress ail or website address son Who Made the Payment, if Not Yo		made	nsfer was	payment
157	acus Credit Counseling 760 Ventura Blvd, Ste 700 cino, CA 91436	Cash	3/8/20	018	\$50.00
PO Sal	lem Law, LLC Box 5250 lem, OR 97304 @salemlawllc.com	Attorney Fees	3/9/20	018	\$500.00
pror		tcy, did you or anyone else acting on your tors or to make payments to your creditor ou listed on line 16.		er any proper	rty to anyone who
	Yes. Fill in the details.				
	son Who Was Paid dress	Description and value of any propertransferred		payment nsfer was	Amount of payment
<b>tran</b> Inclu	sferred in the ordinary course of your	made as security (such as the granting of a se			
	Yes. Fill in the details.				
	son Who Received Transfer dress	Description and value of property transferred	Describe any propayments receive paid in exchange		Date transfer was made
Per	son's relationship to you		paid in excitatinge		

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

Yes. Fill in the details. п

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold. moved, or transferred

Last balance before closing or transfer

**Date Transfer was** 

made

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it?

Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

**Owner's Name** Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP

Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
	No No					
	Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)		Date of notice		
25.	Have you notified any governmental unit of	any release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)		Date of notice		
26.	Have you been a party in any judicial or adm	inistrative proceeding under any en	nvironmental law? Include settlements and	d orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)		Status of the case		
Par	11: Give Details About Your Business or 0	Connections to Any Business				
27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have a	any of the following connections to any b	usiness?		
	☐ A sole proprietor or self-employed in	a trade, profession, or other activit	ty, either full-time or part-time			
	☐ A member of a limited liability compa	any (LLC) or limited liability partners	ship (LLP)			
	☐ A partner in a partnership					
	■ An officer, director, or managing exe	ecutive of a corporation				
	☐ An owner of at least 5% of the voting	g or equity securities of a corporatio	on			
	■ No. None of the above applies. Go to P	art 12.				
	Yes. Check all that apply above and fill	in the details below for each busine	ess.			
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security nu	ımber or ITIN.		
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper				
	Akme Concrete Construction	Concrete	EIN: 82-4364824			
	633 E 7th St McMinnville, OR 97128		From-To 2014			
	Within 2 years before you filed for bankruptoinstitutions, creditors, or other parties.	cy, did you give a financial statemen	nt to anyone about your business? Include	e all financial		
	■ No					
	Yes. Fill in the details below.					
	Name Address	Date Issued				
	(Number, Street, City, State and ZIP Code)					

Debtor 1 Debtor 2	Mark R Hopkins Kathryn L Hopkins			Case number (if known)	18-30938
Part 12:	Sign Below				
are true a	d the answers on this <i>Statement of Financial A</i> nd correct. I understand that making a false stakruptcy case can result in fines up to \$250,000 §§ 152, 1341, 1519, and 3571.	atement,	concealing proper	rty, or obtaining money or	
/s/ Mark R Hopkins		/s/ Kat	thryn L Hopkins		
Mark R Hopkins		Kathryn L Hopkins			
Signature of Debtor 1		Signature of Debtor 2			
Date A	pril 9, 2018	Date	April 9, 2018		
Did you at	ttach additional pages to Your Statement of Fil	nancial A	Affairs for Individua	als Filing for Bankruptcy (	Official Form 107)?
■ No					
☐ Yes					
Did you pa	ay or agree to pay someone who is not an atto	rney to h	nelp you fill out bar	nkruptcy forms?	
☐ Yes. Na	ame of Person . Attach the Bankruptcy Pet	tion Prep	arer's Notice, Decla	ration, and Signature (Offici	al Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.